

RURAL DISTRICT
OF
BRIDLINGTON
Sanitary Authority.

REPORT for the Year 1907,

OF

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BRIDLINGTON,

MARCH, 1908.

GENTLEMEN,

I have the honour to present to you my Annual Report on the Health and Sanitary condition of the Rural District of Bridlington for 1907.

It is with satisfaction that I have to report favourably on the public health of your District during the past year. Doubtless much of our good fortune is due to the natural hygienic advantages of this part of the country, evident in part to the casual traveller, and more fully appreciated by those intimately acquainted with it. Our mortality statistics show, and such records of morbidity as we possess confirm us in the belief, that with more attention to the important details of domestic sanitation, the house, the water supply and the drainage, our death and sickness rates for all preventable diseases should be well below those of Rural England, and far below those of the country generally. Typhus Fever has been unknown for years; there has been no death from Enteric Fever for 5 years; none from Scarlet Fever for seven. Only one case of Puerperal Fever notified in ten years; no case of Enteric Fever notified last year, and only two each of Scarlet Fever and Erysipelas. True we have a reduced marriage-rate and declining birth-rate, with an infantile death-rate over the average prevailing in Rural England generally. These unfortunately voice the same tale—lack of adequate and decent living accommodation—for what inducement is there to young people to marry and stay on the land, when too often the only available house is so suggestive of the hardihood of the Troglodyte and survival of the unfittest. Your efforts in the future, as in the immediate past, should be chiefly directed to the provision of decent living places all over your district, and the destruction or renovation of such as require it. The prevention of dampness, the assuring of adequate ventilation and warmth by the provision of open fire-places in each bedroom;

also drinking water which at least shall be free from organic contamination—and in all the larger villages a suitable scheme of public scavenging—that both air and water may be kept free from excremental pollution and the general atmosphere more salubrious, pleasant and prosperous. The power to take action either in the way of removing broken down dwellings, enforcing a supply of potable water in existing dwellings, and dealing with other nuisances in connection with defective cottage property is given you in the Public Health Water Act, Housing of the Working Classes Act, and the more recent Public Health Acts Amendment Act, 1907, the permissive Sanitary provisions of which latter I should strongly recommend you to adopt together with such other sections as you find called for by the matters brought before you by your Sanitary officials. It is in the careful attention to domestic sanitation that I see the most effective means of checking the spread of Consumption, the most potent and widespread disease known to us in this clime—although the death-rate has of recent years been reduced by half there is evidence to show that Tuberculosis is very extensively scattered throughout the population—a few years ago Dr. C. Heron calculated that there were not less than half a million consumptives in the population of England—whilst the death-rate from Pulmonary Phthisis was fifty per cent. greater than that of all the seven principal Zymotic diseases put together. The chief causes in the spread of Pulmonary Phthisis—the principal member in the Tuberculous group of diseases—are contiguity and communion with diseased persons in badly ventilated spaces such as sleeping rooms, ship cabins, small schools, workrooms and so on—and the ingestion of infected meat and milk, and also *otherwise contaminated* water. The conveyance of infection by ingesta must, I take it, be considered of secondary although incalculably great importance when compared with the question of the aëration of dwellings, workshops, &c. The condition of body characterised by diminution of red blood corpuscles or a low opsonic index is I think shown by the researches of Wright and other observers to be more frequently precedent to the attack of the Tubercular poison—it is not necessarily an early stage of the disease itself, in other words it is the white flag which shows that the defensive resources of the body are so weakened as to render it a ready prey to the Tubercular invader. What, then, is the *causa causans*?—what produces the anæmic condition? Certainly not scanty food! I have never seen insufficient food alone produce the anæmic state and bring down the opsonic index to surrender level, and premising a healthy body, and a healthy open air life, with free play of lungs and muscles, I doubt if even improper or moderately diseased food will do more than cause temporary alimentary inconvenience. This view is supported by the experience of our own nomadic population on the tramp, and by

a host of travellers in countries where primitive life still rules, and per contra by the difficulty experienced by Zoologists in acclimatizing wild animals and rearing those born in captivity. I have no hesitation in affirming that the chief cause of this susceptible bodily condition is bad construction of dwellings, workrooms, and so on, contaminated drinking water which with a foetid damp atmosphere will produce that saprophytic condition of body known as "Anæmic." The chief sufferers are of course the young, ill-nourished, or naturally delicate—these latter being generally accused of having "inherited the disease." It is amongst these also that the malign powers of infected meat and milk find their victims. Of the two, infected milk is the most important, working its greatest havoc in the infantile population, and probably being responsible for the greater part of the Abdominal Tubercloses. Milk drawn from a cow with a tuberculous udder, even a small lesion, is virulently infective, and cannot be absolutely sterilised without much impairing its digestive properties; meat being more efficiently cooked is less likely to convey disease, but there is an appreciable risk even of this. From the following table of animals slaughtered at one of the Manchester Abattoirs, taking the animals as they came, compiled by Mr. King, Chief Veterinary Inspector to the Manchester Corporation, it will be seen that the results point to young animals being infected to a large extent by the ingestion of food, and in particular of milk.

	Number	Number Tuberculous.	Condemned as unfit for food.	Number in which Abdominal Organs only were affected.	Number in which both Abdominal and Thoracic Organs were affected.	Tuberculous Udders.
Cows ...	168	69 or 41 per cent.	11	19	23	2
Heifers ...	124	27 „ 22 „	3	19	4	—
Bullocks..	75	12 „ 16 „	—	8	2	—
Bulls ...	8	2 „ 25 „	—	—	2	—
Calves ...	23	1 „ 4 „	—	—	—	—
Total	398	111	14	46	31	2

The Royal Commission on Tuberculosis decided that the danger of infection from Tuberculous Milk is a serious one, whilst that from Tuberculous Meat, though not to be entirely disregarded, is much slighter than the other.

Clearly then the origin, communication and prevention of Tuberculosis are of the utmost sanitary importance, and every endeavour should be made by Sanitary Authorities to deal with them. The origin and communication are best dealt with as I have outlined in safeguarding the individual and strengthening his physique by attention to domestic sanitation, whilst the prevention should be effected by notification, some segregation and thorough disinfection. The salient points of domestic environment already indicated, together with careful supervision of the meat and milk supplies, are of paramount importance.

The Elementary Schools at Flamborough and Grindale were closed early in the year on account of Measles, of which there were a good many cases in the former village. The Flamborough school was again closed towards the end of the year on account of the sudden occurrence of several cases of Diphtheria. There were several sporadic cases in other parts of the district, but the Flamborough ones formed the chief, indeed the only group. The evidence as to source is not conclusive, but in the Flamborough cases the evidence points their originating from an imported unrecognised case, and in most of those occurring elsewhere to absence of or inefficient disinfection. There were, however, less than half the number notified in the previous year. I should like to see more extended use made of the privilege of Bacteriological examination—for Diphtheria germs lurk in unsuspected places, and do not always produce the clinical symptoms customarily associated with the disease. More especially is this so where early in a mild attack some inefficient local treatment has been adopted for too short a time, giving the spores opportunities for reproduction, with probably attenuated powers, but still capable of transmitting the disease, though not affording a recognisable culture. Further without efficient local treatment, antitoxin injections alone will not always be conclusive, the body becomes immune whilst the local area fauces, posterior nares and upper pharyngeal space continue to afford a favourable breeding ground for spores and bacilli without markedly affecting the health of the host, and these are given off to find a lodging in the first susceptible person. Equally true is the converse, throats showing the clinical symptoms not producing a positive reaction, owing probably to faulty taking of the swab or too recent use of powerful antiseptic gargle—but in both cases a dose or two of Antitoxin will help to clear up the doubtful point and the limitations and advantages of the bacteriologist be more clearly impressed on the mind.

The Water Supply of several of the villages has received your attention during the year, and I have pleasure in chronicling the good work accomplished so far. At Rudston two 100ft. bores have been sunk and are producing a copious supply of water, which I hope will turn out of excellent quality when they have been working a little while—in addition Mr. Bosville has, at his own expense, made another tube well in an intermediate part of the village, so that there is every prospect of Rudston enjoying a decent water supply. At North Burton and Wold Newton the existing supplies are to be safeguarded from contamination. This is the correct procedure so far as it goes, but it will not quite meet the necessities of the case in either village, for one of the wells at North Burton is hopelessly bad, and both Wold Newton and North Burton require an additional well in an accessible position. I have therefore to repeat the advice on this point contained in my previous report. Bempton is to have its water supply brought up to date, and I have no doubt in due time we shall get most of the villages and hamlets in your district attended to. The much discussed well at Burton Agnes has been converted into a tube well, and is satisfactory. The Flamborough Waterworks are now in good going order, and should prove an invaluable help to the progress of the place.

The Scavenging question has occupied a good deal of time, and has been settled so far as Hunmanby is concerned by adopting a system of public scavenging.

Mr. Robson's very excellent report shows that Dairies and Cowsheds, Slaughter Houses, Workshops, and so on, have all received his attention during the past year with very beneficial results, which lead me to hope that he will persevere in his good work and that you will support him in every way. The more we can inculcate the principles of hygiene and obey the laws of health in detail, the less cause is there for elaborate and expensive schemes. Perhaps the most elemental of all sanitary rules is the early removal of excremental deposits from the immediate neighbourhood of dwellings and water supplies, and this I strongly recommend to all concerned.

You are still without any accommodation for the isolation of Small Pox or other dangerous epidemic disease, which in view of the multiplying of the conscientious objector I would again bring to your notice. The more easy the Legislature makes it for people to shirk the plain duties of citizens to adopt the most expedient, obvious, easiest and most economical methods for the check of preventable disease—the more money local Authorities must be prepared to spend in isolating the infectious sick.

Name of Parish.	Population at Census in 1881.	Population at Census in 1891.	Population at Census in 1901.	Births in 1907	Deaths in 1907.	
					All Causes.	Zymotic.
Bessingby	80	87	170	3	1	...
Carnaby	180	200	192	3	2	...
Boynton	156	126	161	5	...	...
Easton	23	32	38	2	...	...
Hilderthorpe	26	41	80	...	...	...
Sewerby and Marton	343	331	330	4	6	...
Buckton	151	141	158	1	6	...
Flamborough	1355	1288	1189	41	26	5
Bempton & Newsome	309	310	284	8	7	...
Rural Bridlington...	2626	2556	2602	67	48	5
Hunmanby	1351	1309	1289	3	11	1
Speeton	160	151	146	2	1	1
Grindale	179	157	154	7	6	1
Argham	39	40	40	...	...	...
Rudston	604	578	552	14	7	...
Thwing and Octon ...	439	367	326	6	4	1
Wold Newton	310	292	274	8	4	...
North Burton	543	425	422	11	7	...
Reighton	254	252	219	11	2	...
Fordon	57	38	38	1	1	...
Hunmanby Sub-Dist	3936	3609	3460	63	43	4
Burton Agnes	342	321	326	6	4	...
Haisthorpe... ..	123	121	118	2	2	...
Thornholme	110	115	84	2	3	...
Gransmoor... ..	84	68	69	1	...	...
Lissett	90	105	98	2	2	...
Ulrome	194	198	187	2	...	...
Dringhoe, Upton, and Brough	156	156	136	1	2	...
Skipsea	398	341	288	7	...	...
Barmston	198	213	210	4	...	...
Fraisthorpe, Auburn, and Wilsthorpe.....	126	124	111	1	...	...
Skipsea Sub-District	1821	1762	1627	28	13	0
Rural District ...	8383	8927	7689	188	104	9

POPULATION.

The local table of Parishes shows 104 deaths, and the table of gross mortality 97—the extra 7 are of inhabitants who have died outside the limits of the Rural District, but whose deaths having to be considered in working out the mortality-rate, are allocated to their respective localities.

TABULAR SYNOPSIS.

Sub-District.	Estimated Population in 1907.	Births in 1907.	Birth Rate.	Deaths.		Death Rates in 1907.		
				At all Ages	Under 1 year.	General.	Zymotic.	Infantile.
Rural Bridlington	2595	67	25.8	48	5	18.4	1.90	74.6
Hunmanby	3498	93	23.7	43	15	12.2	1.10	161.2
Skipsea	1581	28	17.7	13	1	8.2	0.00	35.7
Rural Districts	7574	188	24.6	104	21	13.5	1.10	111.7

VITAL STATISTICS OF ENGLAND AND WALES IN 1907.

The Birth-rate in England and Wales in 1907 was 26.3 per 1,000 of the population, which is 0.8 below the rate in 1906, and lower than the rate in any other year on record; compared with the average in the ten years 1897-1906, the Birth-rate in 1907 showed a decrease of 2.1 per 1,000.

The Death-rate in 1907 was 15.0 per 1,000, which was 0.4 per 1,000 below the rate in 1906, and lower than the rate in any other year on record; compared with the average rate in the ten years 1897-1906, the death-rate in 1907 showed a decrease of 1.7 per 1,000.

The rate of mortality among infants under one year of age to 1,000 registered births was 118, which is 14 per 1,000 below the rate in 1906. Compared with the average in the ten years 1897-1906, the rate of infantile mortality in 1907 showed a decrease of 27 per 1,000. The death-rate among persons aged between 1 year and 60 years was 7.5, and that among persons aged 60 years and upwards was 69.4 per 1,000 of the estimated populations at the respective groups of ages.

The Zymotic Death-rate was 1.26 per 1,000 living, against 1.94, 1.52, and 1.73 respectively in the three preceding years.

ANNUAL DEATH RATE PER 1000 LIVING.

	Birth Rate.	Death Rate, All Causes.	Principal Epi- demic Diseases in Cols. 4 & 10.	Small Pox.	Measles.	Scarlet Fever.	Diphtheria.	Whooping Cough.	Fever.	Diarrhoea.	Deaths under 1 Year per 1000 Births.
	1	2	3	4	5	6	7	8	9	10	11
Columns	26.3	15.0	1.26	0.00	0.36	0.09	0.16	0.29	0.07	0.29	118
England and Wales ...	27.0	15.4	1.54	0.00	0.43	0.12	0.17	0.35	0.07	0.40	127
76 Great Towns... ..	25.7	14.5	1.29	0.09	0.41	0.08	0.16	0.29	0.07	0.29	122
142 Smaller Towns ...	25.6	14.7	0.91	0.00	0.25	0.06	0.15	0.21	0.05	0.18	106
England and Wales } less the 218 Towns }											

The Vital Statistics of England and Wales, together with the subjoined table, are taken from the Registrar-General's Report for the final quarter of 1907.

MARRIAGES.

The number of Marriages in the Rural District in 1907 was 38, being at the rate of 9·9 persons married to each 1,000 living. The Marriage-rate for the three immediately preceding years was 7·7, 9·5, and 13·88. The mean average rate for the ten years 1897-1906 for England and Wales was 17·2.

BIRTHS AND BIRTH-RATES.

There were 188 Births registered in the Rural District during 1907, which is equivalent to a Birth-rate of 24·6 per 1,000 living, as compared with 26·9 in 1906, 24·03 in 1905, and 25·96 in 1904. The Sub-District Birth-rates were:—Rural Bridlington, 25·8, Hunmanby, 23·7, and Skipsea, 17·7. The Illegitimate Births number 18, and equal an Illegitimate Birth-rate of 2·3 per 1,000 of the population, and 9·9 per cent. of the total births.

TABLE OF QUARTERLY TOTALS (BIRTHS.)

1907.				1906.		
BRIDLINGTON SUB-DISTRICT.	Males.	Females.	Total.	Males.	Females.	Total.
1st Quarter.....	14	3	17	13	8	21
2nd Quarter.....	10	9	19	12	8	20
3rd Quarter.....	10	7	17	4	10	14
4th Quarter.....	5	9	14	5	9	14
Totals...	39	28	67	34	35	69
HUNMANBY SUB-DISTRICT.						
1st Quarter.....	9	8	17	11	14	25
2nd Quarter.....	15	11	26	18	10	28
3rd Quarter.....	11	16	27	10	11	21
4th Quarter.....	13	10	23	11	17	28
Totals...	48	45	93	50	52	102
SKIPSEA SUB-DISTRICT.						
1st Quarter.....	3	4	7	6	7	13
2nd Quarter.....	2	2	4	4	4	8
3rd Quarter.....	4	4	8	4	2	6
4th Quarter.....	5	4	9	4	6	10
Totals...	14	14	28	18	19	37
Totals for Rural District...	101	87	188	102	106	208

TABLE OF QUARTERLY TOTALS (DEATHS).

		1907.			1906.		
		Males.	Females.	Total.	Males.	Females.	Total.
BRIDLINGTON SUB-DISTRICT.							
1st Quarter.....		5	7	12	2	8	10
2nd Quarter.....		6	6	12	3	8	11
3rd Quarter.....		5	7	12	5	2	7
4th Quarter.....		5	7	12	2	2	4
Totals...		21	27	48	12	20	32
HUNMANBY SUB-DISTRICT.							
1st Quarter.....		7	7	14	12	14	26
2nd Quarter.....		2	5	7	6	6	12
3rd Quarter.....		5	7	12	3	4	7
4th Quarter.....		3	7	10	4	4	8
Totals.....		17	26	43	25	28	53
SKIPSEA SUB-DISTRICT.							
1st Quarter.....		3	3	6	3	2	5
2nd Quarter.....		2	1	3	2	4	6
3rd Quarter.....		1	1	2	2	3	5
4th Quarter.....		1	1	2	4	5	9
Totals...		7	6	13	11	14	25
Totals for Rural District...		45	59	104	48	62	110

DEATHS AND DEATH-RATES.

The corrected Deaths for the Rural District in 1907 were 104, against 110 in 1906, and 102 in 1905. The Death-rate from all causes at all ages was 13·5 per 1,000 living, as compared with 14·20, 13·17, and 13·24 in 1906, 1905, and 1904 respectively, and 14·7 for Rural England in 1907.

There were 21 deaths of children under one year of age, being in the proportion of 111·7 infantile deaths to each 1,000 registered births, and 5·7 above the rate for Rural England and Wales in 1907, and 19·9 below the corresponding rate for 1906. Of these infantile deaths, 2 or 9·5 per cent. were of children born out of wedlock, and represent 11·10 per cent. of the illegitimate births of the year.

CAUSES OF DEATH.

Nine deaths were due to Measles, Diarrhœa, Whooping Cough and Diphtheria, giving a Zymotic Death rate of 1·10 per 1,000 of the population, being ·18 above the same rate in the previous year. There were the same number of deaths from Diphtheria as in 1906, whilst Cancer and Malignant Disease were 4 only as compared with 10 in the previous year. There was the customary one death from Diarrhœa, whilst Measles, with 3, was one in excess of 1906. Whooping Cough, Erysipelas, and Tubercular Diseases show fewer fatal cases than in the previous year, whilst the fatal case of Puerperal Fever is the only one registered during the past decade. Influenza this year was directly responsible for 4 deaths ; whilst Bronchitis, Pneumonia and Pleurisy totalled 9, against 11 in the preceding twelve months. There were more Coroners' Inquests and fewer deaths from Senile Decay. Premature Birth, Marasmus, Congenital Debility, and Teething number 2 less than the totals of 1906.

AGE.

There were 31 deaths of children under 5 years of age, and 31 had attained to 65 and upwards, with 35 in the middle period of life. These figures differ very little from those of the two preceding years--being 29, 39 and 36, and 28, 38 and 30 for 1906 and 1905 respectively.

CAUSE OF DEATH.

CAUSE OF DEATH.	AGE.						SEX.		Registration Sub-District			QUARTER OF YEAR.				
	Under 1 year	From 1 to 5.	From 5 to 15.	From 15 to 25.	From 25 to 65.	From 65 upwards.	Males.	Females.	Bridlington.	Hunmanby.	Skipsea.	1st Quarter.	2nd Quarter.	3rd Quarter.	4th Quarter.	Total.
Measles	2	1	..	..	..	..	2	1	2	1	..	3	..	..	..	3
Diarrhoea .. ..	..	1	..	..	..	..	..	1	..	1	..	..	..	..	..	..
Diphtheria .. ..	..	1	3	..	..	..	1	3	3	1	..	1	..	1	2	4
Whooping Cough .. ..	..	1	..	..	..	..	..	1	..	..	..	..	..	..	..	..
Influenza .. ..	..	2	..	..	2	..	4	..	2	..	2	3	..	..	..	4
Puerperal Fever .. ..	..	..	..	..	1	..	..	1	..	..	..	1	..	..	..	1
Erysipelas .. ..	..	..	..	..	1	..	..	1	..	..	..	..	..	..	..	1
Phthisis Pulmonalis .. ..	..	1	1	1	2	..	2	3	4	1	..	..	1	1	3	5
General Tuberculosis .. ..	..	..	1	..	..	..	1	..	..	..	..	..	..	..	..	1
Cancer and Malignant Disease .. ..	..	..	..	..	2	2	1	..	3	1	..	..	2	1	..	4
Bronchitis, Pneumonia and Pleurisy	1	..	..	1	2	5	5	4	4	4	1	4	4	..	1	9
Diseases of Brain and Spinal Cord	3	..	..	..	4	1	1	7	5	2	1	4	1	2	1	8
Diseases of Kidney and Bladder .. ..	..	..	..	..	1	3	3	1	..	3	1	1	1	2	..	4
Diseases of Heart .. ..	..	..	..	1	6	2	2	7	4	4	1	..	1	5	3	9
Diseases of Abdominal Viscera	1	1	..	..	2	2	2	4	3	2	1	..	3	2	1	6
Premature Birth and Congenital Debility	8	..	..	..	..	..	4	4	1	7	..	3	..	3	2	8
Marasmus and Teething	3	..	..	..	..	..	1	2	..	3	..	..	2	..	1	3
Senile Decay .. ..	..	..	..	..	..	11	2	9	3	5	3	4	2	3	2	11
Inquests { Accidents Suicides Natural Causes .. ..	..	1	..	..	1	2	3	1	4	..	..	2	1	..	1	4
	..	..	..	..	1	1	1	1	2	..	..	1	..	..	1	2
	2	2	1	..	1	2	4	4	5	2	1	3	2	2	1	8
Total	20	11	6	3	26	31	39	58	45	41	11	30	20	25	22	97

INFECTIOUS DISEASES (NOTIFICATION) ACT.

Disease.	Rural District.	SUB-DISTRICT.			1st Quarter.	2nd Quarter.	3rd Quarter.	4th Quarter.
		Rural Bridlington.	Hunmanby,	Skipsea.				
Diphtheria ...	22	16	6	...	5	6	1	10
Erysipelas ...	2	2	...	...	...	...	1	1
Scarlet Fever...	2	1	...	1	...	...	1	1
Puerperal Fever	1	...	1	...	1	...	...	...
Measles ...	82	56	24	2	58	5	15	4
Totals ...	109	75	31	3	64	11	18	16

NOTIFICATION STATISTICS FOR YEARS
1898-1907.

Disease.	1898.	1899.	1900.	1901.	1902.	1903.	1904.	1905.	1906.	1907.
Diphtheria ...	3	13	2	8	...	6	1	5	48	22
Erysipelas ...	4	2	7	3	5	1	6	6	6	2
Scarlet Fever ...	78	25	49	41	15	9	6	13	9	2
Enteric Fever ...	8	7	1	7	2	...	1	7	1	...
Puerperal Fever	...	...	...	...	...	...	...	...	...	1
Measles ...	47	16	97	12	2	10	142	31	126	82
Totals ...	140	63	156	71	24	26	156	62	190	109

DEATHS FROM CERTAIN DISEASES IN THE YEARS

1898-1907.

	1898.	1899.	1900	1901.	1902.	1903.	1904.	1905.	1906.	1907.
Diarrhœa	3	3	1	3	...	1	4	2	1	1
Measles ... ..	...	...	2	...	...	...	1	...	2	3
Enteric Fever ...	2	1	...	1	1	...	...	...	...	...
Scarlet Fever ...	5	...	1	1	...	...	...	...	...	...
Diphtheria ... ..	...	5	...	3	...	...	1	2	4	4
Influenza	8	5	5	1	...	...	...	2	2	4
Childbirth... ..	...	1	1	1	...	1	3	...	2	1
Bronchitis, Pneumonia ...	15	12	16	16	9	10	12	17	11	9
Tuberculosis ...	13	8	12	6	7	11	4	15	9	6
Cancer	3	5	3	11	4	4	5	8	10	4

Having already fully dealt with the substance of this table, I will here draw your attention to two points I think deserving of mention. The Registrar-General, in his 69th Annual Report, shows that the death-rate from all forms of Tuberculosis has fallen from 3,400 per million in 1857 to 1,600 per million in 1906—the year under his consideration. Gratifying as this diminution is, it does not connote an equivalent reduction in the amount of disease, but must rather be taken as the measure of success achieved in its treatment, largely due to the advances made by modern pathological bacteriology—and gives every hope that by equal effort in the prevention of the disease we may in the not too distant future eradicate Consumption. Tuberculosis appears to have been the cause of 10·7 per cent. of the total mortality from all causes in 1906—and to have been responsible for a death-rate of 1,644 per million living at all ages and of both sexes. Our average for the ten years tabled above was 1,180 per million.

“The deaths assigned to Cancer or Malignant Disease in 1906 were more numerous than the average in the ten years ended 1905.” This was the case with us in that year, but in 1907 our total was well below the decennial average. The death-rate, based on the average 1901-1905 for the Rural Counties of England and Wales, was 2,420—per million living—our corresponding rate for the Rural District for the ten years 1898-1907 being 740 per million, so that the idea recently expressed to me that this is a Cancer neighbourhood is hardly supported by statistics.

VACCINATION STATISTICS.

The following table relates to Vaccination in the Bridlington Registration Sub-District, the Borough of Bridlington contributing the bulk of the population, but the paragraph following the table relates to the Hunmanby and Skipsea Sub-Districts, each being a vaccination area. Such portion of Bridlington Sub-District as is outside the Borough Boundary, together with Hunmanby and Skipsea areas, form the Rural Sanitary District. The figures are the complete returns for 1906 and previous years.

Year.	Births.	Successfully Vaccinated.	Insusceptible.	Died Unvaccinated.	Postponed by Medical Certificate.	Removed to Districts known.	Removed to Districts unknown.	Conscientious Objectors.	Unaccounted for.	Per cent.
1891	324	245	...	36	2	...	...	...	40	12.3
1892	290	206	...	24	...	1	...	...	59	20.0
1893	326	202	...	33	...	2	...	...	89	27.3
1894	309	192	...	32	2	4	10	...	67	24.9
1895	308	147	...	33	2	...	...	...	67	40.26
1896	327	212	2	42	1	2	11	...	57	20.7
1897	344	213	3	33	...	2	1	3	89	26.7
1898	348	222	7	52	1	3	7	3	51	16.6
1899	373	268	6	36	10	4	7	17	25	8.5
1900	363	263	1	41	1	1	17	23	33	9.09
1901	396	291	...	51	4	2	11	32	5	4.0
1902	382	313	2	32	3	1	11	18	2	3.4
1903	366	284	2	29	...	...	18	25	8	7.1
1904	382	269	6	34	...	...	17	45	11	7.3
1905	352	262	1	24	1	1	25	23	15	11.3
1906	303	261	1	22	...	2	15	39	12	7.6

In 1906 in the Hunmanby and Skipsea Sub-Districts there were 137 births, of which 120 were successfully vaccinated, one was exempt on account of "conscientious objection," twelve died unvaccinated, two removed to a district known, the Vaccination Officer of which was duly notified, and two were lost sight of.

For the first half of 1907 there were registered in the whole Union 230 births, of these 161 were successfully vaccinated, 21 died unvaccinated, 16 were exempt on account of "conscientious objection," 9 were postponed by medical certificate, 2 were declared

insusceptible, 4 removed to a district known, the Vaccination Officer of which was duly notified, 6 removed to districts unknown, and 11 were lost sight of.

In conclusion I beg to thank the Rural District Council for the confidence they have placed in me, and to congratulate them on the appreciable amount of progress achieved during the past year.

I append Mr. Robson's excellent report and the usual Tables of Statistics required by the Local Government Board and the Home Office.

I am, Gentlemen,

Your Obedient Servant,

W. A. WETWAN,

Medical Officer of Health.

To the Rural District Council

and Sanitary Authority,

Bridlington.

BRIDLINGTON,

FEBRUARY, 1908.

SIR,

I have the honour to report to you on Sanitary administration in the Rural District in the year 1907.

So far as regards public works, during the year the villages of Flamborough and Rudston have been provided with an ample supply of water, which the inhabitants of those places much appreciate. In other villages no extensive improvement of existing supplies or provision of new supplies has as yet been undertaken, although work of that nature is contemplated. The public sewer of the village of Barmston was re-laid throughout its length in the early part of the summer, and other places in which minor sewerage works were executed included Carnaby and Gransmoor.

Private enterprise has not been extensive during the year, few new houses having been built, and very little done in the way of repairing and making more comfortable the dwellings of the labouring classes. A good many of the cottages in the villages have outlived their time, they are not in accord with present day standards of comfort and convenience, and are quite ready for replacement by modern dwellings constructed with due regard to light, air and living space. Several, while not being such as should be condemned as uninhabitable, are very unsuitable and insufficient for the families whom they have to accommodate. It is impossible for the people inhabiting some of these places to live in them with decent comfort, but in the absence of more adequate accommodation within their means they at present have no alternative. It is clear that the people desire to live in better houses if such were provided at a rent which they could afford.

During the year a number of small matters, comprising overflows from manure yards, accumulations of nightsoil, &c., blocked and untrapped drains, unsuitable piggeries, offensive open cesspools, overcrowding, and similar nuisances, were abated and disposed of. These numbered about 49, and were for the greater part dealt with by private representation to the owners or occupiers concerned, only a few cases having to be brought to the notice of the Council.

The Cowsheds in the District have, as usual, been under my observation throughout the year. Generally speaking, they were maintained in a condition of fair cleanliness and suitability, the proprietors being willing to do whatever was suggested to them

with the view of keeping the places wholesome. The cattle are mostly in the open from early spring to autumn. The milk which is not required in the villages is sent to Scarborough, Filey, and Bridlington for the retail trade, and the source of every supply sent from the Rural District to these towns is known or can be readily ascertained.

The Factories and Workshops Acts appear to apply in a minor degree to about 32 places in the District, embracing tailors' and dressmakers' workrooms, three roperies, four or five brickyards, and mechanics' workshops. All of these are satisfactory as regards sanitation, and in no case was any action necessary.

I have on frequent occasions inspected the nine Slaughter-houses in use within the District, and have invariably found them kept in a condition of order and cleanliness. Great care is exercised by the proprietors, and no cause for complaint has arisen.

There were some cases of Diphtheria during the year, at Flamborough, Hunmanby, Sewerby and Speeton, some of them unhappily proving fatal.

Below is set out a table shewing an analysis of the matters dealt with:—

Blocked drains and gullies, absence of drainage, offensive cesspools, and the like	...	...	...	...	...	20
Liquid escaping from fold yards	...	...	...	...	...	5
Accumulations of nightsoil, refuse, &c., removed	...	...	...	...	...	7
Defective privy accommodation	...	...	...	...	...	8
Overcrowding	...	...	...	...	...	3
Miscellaneous	...	...	...	...	...	6
Present number of Cowsheds on the Register and under inspection	...	...	...	...	...	73

I am, Sir,

Your obedient Servant,

FRANCIS H. ROBSON,

Assoc. Royal San. Inst.,

Inspector of Nuisances.

REPORT OF MEDICAL OFFICER OF HEALTH, on the
administration of the Factory and Workshop Act, 1901.

INSPECTIONS.

Premises.	Number of Inspections.	Number of Written Notices.	Number of Prosecutions.
Factories (Including Factory Laundries) ... ..	...	...	...
Workshops (Including Work- shop Laundries) ...	50	...	...
Workplaces (Other than Out- workers' premises) ...		...	...
Total	50.	...	...

REGISTERED WORKSHOPS.

Total Number of Workshops on List 32

There are very few places in the District coming under these Acts. All the Joiners' and Blacksmiths' Shops are now included, though they are for the most part only worked in by the proprietor and perhaps one journeyman and apprentice.

VITAL STATISTICS OF WHOLE DISTRICT DURING 1907 AND PREVIOUS YEARS.

Year	Population estimated to Middle of each Year.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT.						NETT DEATHS AT ALL AGES BELONGING TO THE DISTRICT.	
		Number.	Rate.	Under 1 year.		At all Ages.		Deaths of Residents registered in Public Institutions beyond the District.	Number.	Rate.	
				Number.	Rate per 1000 Births registered.	Number.	Rate.				
1897	8447	223	26.39	30	134.52	111	13.09	...	111	13.09	
1898	8528	198	23.2	26	131.31	117	14.07	...	117	14.07	
1899	8648	219	26.00	26	118.9	101	11.68	...	101	11.68	
1900	8708	209	24.00	22	105.3	99	11.36	...	99	11.36	
1901	7689	205	26.67	27	131.21	115	15.08	6	121	15.74	
1902	7680	207	26.95	15	72.46	92	11.97	7	99	12.89	
1903	7724	177	22.91	26	146.8	95	12.29	7	99	12.81	
1904	7780	201	25.96	26	129.35	98	12.59	5	103	13.24	
1905	7740	186	24.03	18	96.77	96	12.04	6	102	13.17	
1906	7714	208	26.9	20	96.1	104	13.4	6	110	14.00	
Averages for years 1897-1906.	8065.8	203.3	25.24	23.6	116.27	102.8	12.75	...	106.2	13.20	
1907	7674	188	24.6	21	111.7	97	12.6	7	104	13.5	

Area of District, 60,000 acres. Total population at all ages, 7689. Number of Inhabited houses, 2256.

Average number of persons per house, 3.4, Census of 1901.

Institutions outside District receiving sick and infirm persons from the District :—

The East Riding Asylum, Beverley; The Royal Infirmary, Hull; The Union Infirmary Bridlington; The Lloyd Hospital, Bridlington; St. Anne's Convalescent Home, Bridlington.

VITAL STATISTICS OF SEPARATE LOCALITIES IN 1907 AND PREVIOUS YEARS.

NAMES OF LOCALITIES.	WHOLE DISTRICT.				RURAL BRIDLINGTON.				HUNMANBY.				SKIPSEA.			
	Population estimated to middle of each year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.
YEAR.																
1897 ..	8447	223	111	30	2773	67	39	9	3845	124	59	20	1829	32	13	1
1898 ..	8528	198	117	26	2798	56	31	7	3889	106	62	14	1841	36	24	5
1899 ..	8648	219	101	26	2820	60	40	11	3961	120	47	11	1866	39	14	4
1900 ..	8708	209	99	22	2838	60	34	5	3988	108	48	13	1882	41	17	4
1901 ..	7689	205	121	27	2602	65	37	8	3460	99	55	15	1627	41	29	4
1902 ..	7630	207	99	15	2630	61	39	3	3450	104	44	10	1600	42	16	2
1903 ..	7724	177	99	26	2638	51	31	4	3486	99	51	17	1600	29	17	5
1904 ..	7780	201	103	26	2660	69	34	9	3516	93	42	10	1604	39	27	7
1905 ..	7740	186	102	18	2630	52	44	5	3520	101	38	8	1590	33	20	5
1906 ..	7714	208	110	20	2622	69	32	6	3507	102	53	11	1585	37	25	3
Averages of Years 1897 to 1906.	8065.8	203.3	106.2	23.6	2701.1	59.0	35.1	6.7	3662.2	105.6	49.9	11.1	1701.8	36.9	21.2	4.0
1907 ..	7674	188	104	21	2595	67	48	5	3498	93	43	15	1581	28	13	1

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1907.

NOTIFIABLE DISEASE.	At all Ages.	TOTAL CASES NOTIFIED IN EACH LOCALITY.		
		Rural Brid'ton.	Hunmanby.	Skipsea.
Diphtheria	22	16	6	
Erysipelas	2	2		
Scarlet fever	2	1		1
Puerperal fever	1		1	
Measles	82	56	24	2
Totals	109	75	31	3

CAUSES OF, AND AGES AT, DEATH, DURING THE YEAR 1907.

CAUSES OF DEATH.	All Ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.	Rural Bridlington	Hunmanby	Skipsea.
Measles ...	3	2	1	...	...	...	...	2	1	...
Whooping Cough ...	1	...	1	...	...	...	...	...	1	...
Diphtheria and membranous croup ...	4	...	1	3	...	...	...	3	1	...
Epidemic Influenza ...	4	...	2	...	...	2	...	2	...	2
Diarrhœa ...	1	...	1	...	...	...	...	...	1	...
Enteritis ...	3	...	1	...	...	2	...	3	...	...
Puerperal Fever ...	1	...	...	...	...	1	...	...	1	...
Erysipelas ...	1	...	...	...	...	1	...	...	1	...
Phthisis ...	5	...	1	1	1	2	...	4	1	...
Other tubercular diseases...	1	...	...	1	...	...	...	...	1	...
Cancer ...	4	...	...	...	...	2	2	1	2	1
Bronchitis ...	5	...	...	...	1	1	3	2	2	1
Pneumonia ...	4	1	...	...	...	1	2	2	2	...
Other diseases of Respiratory Organs ...	1	1	...	...	...	...	...	...	1	...
Alcoholism (Cirrhosis of Liver) ...	1	...	...	...	...	...	1	1	...	...
Premature Birth ...	5	5	...	...	...	...	...	...	5	...
Heart Diseases ...	9	...	...	...	1	1	7	4	4	1
Accidents ...	4	1	...	...	...	1	2	4	...	...
Suicides ...	2	...	...	...	...	...	2	2	...	...
Natural Causes ...	8	2	2	1	...	1	2	5	2	1
All other Causes ...	37	9	1	...	...	13	14	14	16	7
All Causes ...	104	21	11	6	3	28	35	48	43	13

INFANTILE MORTALITY DURING THE YEAR 1907.

CAUSES OF DEATH.	Under 1 week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	7-8 Months.	8-9 Months.	9-10 Months.	11-12 Months.	Total Deaths under One Year.
All Causes } Certified by Coroner	3 1	1 2	2 1	2 1	8 2	2 1	1 1	2	2	1	1	1	18 3
Measles ...	2		2	1	5	2					1	1	2
Premature Birth													5
Congenital Defects													2
Atrophy, Debility, Marasmus		1			1		1	1	1				4
Convulsions ...				1	1		1	1		1			4
Pneumonia									1				1
Suffocation, over-lying	1				1								1
Other Causes ...	1			1	2								2
	4	1	2	3	10	2	2	2	2	1	1	1	21

Population estimated to middle of 1907, 7674. Births in the year: legitimate 170, illegitimate 18.
Deaths in the year of legitimate infants 19, illegitimate infants 2. Deaths from all Causes at all Ages 104